


2700 INTERNAL TRANSFER REQUEST FOR S.N.

09/359/35

DATE: <u>10/9/99</u>	FROM: <u>Lee Nguyen</u> (print name)
FORWARD TO: A. Art Unit: <u>2731</u> B. Class: <u>370</u> C Subclass: <u>347</u>	REASON(S): A. You had Parent <input type="checkbox"/> (check box) B. See Title <input type="checkbox"/> (check box) C. See Abstract <input type="checkbox"/> (check box) D. See Claim(s): <u>X</u>
FURTHER EXPLANATION IF NEEDED: <u>TDM claims.</u>	

DATE: _____	FROM: _____ (print name)
FORWARD TO: A. Art Unit: _____ B. Class: _____ C Subclass: _____	REASON(S): A. You had Parent <input type="checkbox"/> (check box) B. See Title <input type="checkbox"/> (check box) C. See Abstract <input type="checkbox"/> (check box) D. See Claim(s): _____
FURTHER EXPLANATION IF NEEDED:	

DATE: _____	FROM: _____ (print name)
FORWARD TO CLASSIFIER ) 	REASON(S): A. You had Parent <input type="checkbox"/> (check box) B. See Title <input type="checkbox"/> (check box) C. See Abstract <input type="checkbox"/> (check box) D. See Claim(s): _____
FURTHER EXPLANATION IF NEEDED:	

## DISPOSITION BY 2700 CLASSIFICATION

DATE: _____	CLASSIFIER: _____
FORWARD TO: A. Art Unit: _____ B. Class: _____ C Subclass: _____	REASON(S): A. You had Parent <input type="checkbox"/> (check box) B. See Title <input type="checkbox"/> (check box) C. See Abstract <input type="checkbox"/> (check box) D. See Claim(s): _____
FURTHER EXPLANATION IF NEEDED:	